

Braille Authority of North America

Membership Information

Membership Categories

Full members are voting members of BANA, are required to send a representative to all BANA board meetings (at the member organization's expense), participate on board committees as assigned, pay annual dues, and host board meetings on a rotating basis.

They receive all board and technical committee reports.

Associate members have an advisory role only, may send a representative to BANA board meetings (at the member organization's expense) and participate in discussions, and pay annual dues at a lower rate than full members. They receive approved board and technical committee reports.

Membership Criteria

Organizations, agencies, and businesses will be considered for membership if they have the following purposes, scope and functions:

- Braille use or production must be a primary, but not necessarily the only, purpose of the organization, agency or business.
- Primary braille codes used must be those approved by BANA although codes approved by other braille authorities may be used for production of braille materials intended for use in countries which use a different code.
- The scope of the organization, agency, or business shall be national or international.
- The organization, agency, or business shall have been working with braille or in support of braille related issues for at least five (5) years.
- The function of the organization, agency or business shall be in support of BANA's mission.

Current Dues Schedule

Member	\$1000
Associate Member	\$500

Application Packet

Organizations wishing to be considered for membership in BANA should submit the following information to the Board through the Chairperson.

- Completed information form.
- Documents demonstrating commitment to braille and the use of BANA codes, including but not limited to, bylaws, mission statement, statement of organizational scope.
- Documents demonstrating fiscal stability over the past five (5) years, such as annual reports.

The application packet will be reviewed by the Membership Committee for completeness. Requests for membership will be presented to the Board at the next meeting. A two-thirds vote for approval is required for acceptance into membership.

Braille Authority of North America

Membership Application

As an organization, agency, or business that supports the purpose of the Braille Authority of North America (BANA) "to promote and to facilitate the uses, teaching and production of braille," we hereby request consideration for membership in BANA.

AGENCY:		
ADDRESS:		
PHONE:	FAX:	EMAIL:
CEO:		CONTACT PERSON (IF OTHER THAN CEO)

Check one:

_____ This is a non-profit organization or agency and we are applying for full membership in BANA.
Current dues: \$1000 per year.

_____ This is an organization, agency, or business and we are applying for associate membership in BANA. Current dues: \$500 per year.

This organization, agency or business has been working with braille or in support of braille since _____. It is _____ national or _____ international in scope.

Document Checklist

- Be sure you have included in your packet the following information:
- Documents demonstrating commitment to braille, such as bylaws, mission statement, statement of organizational scope.
- Documents demonstrating fiscal stability over the past five (5) years.

SIGNATURE:	
TITLE:	DATE:

Submit the packet to

Judy Dixon
1805 North Oakland Street
Arlington, VA 22207
jdix@loc.gov